


**TRANSMITTAL
FORM**
(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/963,858
Filing Date	September 25, 2001
First Named Inventor	Frechet, Jean J.
Art Unit	1637
Examiner Name	Riley, Jezia
Attorney Docket Number	061818-5011-US

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (See Remarks) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none"> • Return postcard • Declaration of Jean J. Frechet • Article (Exhibit A)
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 50-0310.
Applicants petition to extend the period for filing a response for the above-identified patent application for 3 months, from August 24, 2004 to November 24, 2004. A Fee Transmittal authorizing the Commissioner to charge the petition fee to our deposit account is attached.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Morgan, Lewis & Bockius LLP	Reg. No. 46,690
Signature		
Date	November 24, 2004	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being transmitted to the USPTO via United States Postal Service first class mail, with sufficient postage and envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Kathryn A. Deglantoni		
Signature		Date	November 24, 2004



FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

CONFIRMATION NO. 1612

TOTAL AMOUNT OF PAYMENT (\$ 490.00)

Complete if Known

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First Named Inventor	Frechet, Jean J.
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METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account:

Deposit Account Number **50-0310**

Deposit Account Name **Morgan, Lewis & Bockius LLP**

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	790	2001	395	Utility filing fee	
1002	350	2002	175	Design filing fee	
1003	550	2003	275	Plant filing fee	
1004	790	2004	395	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) **(\$)**

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
			-**	=	X =

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	88	2201	44	Independent claims in excess of 3
1203	300	2203	150	Multiple dependent claim, if not paid
1204	88	2204	44	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **(\$)**

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1051	130	2051 65 Surcharge - late filing fee or oath	
1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet	
1053	130	1053 130 Non-English specification	
1812	2,520	1812 2,520 For filing a request for reexamination	
1804	920*	1804 920* Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805 1,840* Requesting publication of SIR after Examiner action	
1251	110	2251 55 Extension for reply within first month	
1252	430	2252 215 Extension for reply within second month	
1253	980	2253 490 Extension for reply within third month	490
1254	1,530	2254 765 Extension for reply within fourth month	
1255	2,080	2255 1,040 Extension for reply within fifth month	
1401	340	2401 170 Notice of Appeal	
1402	340	2402 170 Filing a brief in support of an appeal	
1403	300	2403 150 Request for oral hearing	
1451	1,510	1451 1,510 Petition to institute a public use proceeding	
1452	110	2452 55 Petition to revive - unavoidable	
1453	1,370	2453 685 Petition to revive - unintentional	
1501	1,370	2501 685 Utility issue fee (or reissue)	
1502	490	2502 245 Design issue fee	
1503	660	2503 330 Plant issue fee	
1460	130	1460 130 Petitions to the Commissioner	
1807	50	1807 50 Petitions related to provisional applications	
1806	180	1806 180 Submission of Information Disclosure Stmt	
8021	40	8021 40 Recording each patent assignment per property (times number of properties)	
1809	790	2809 395 Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810 395 For each additional invention to be examined (37 CFR § 1.129(b))	
1801	790	2801 395 Request for Continued Examination (RCE)	
1802	900	1802 900 Request for expedited examination of a design application	
Other fee (specify) _____			

(\$490.00)

*Reduced by Basic Filing Fee Paid SUBTOTAL (3)

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Todd Esker	Registration No. (Attorney/Agent)	46,690	Telephone (415) 442-1000
Signature			Date	November 24, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.